



IPW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln No.: 10/748,885

Confirmation No. 7028

Filed: December 30, 2003

CERTIFICATE OF MAILING

Applicants: Bernard J. Wojciak

Title: SYSTEM AND METHOD FOR
ACTUATING A MOVEABLE
BARRIER OPERATOR

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

Art Unit: 2837

5/13/05
Date

Kenneth H. Samples
Kenneth H. Samples
Registration No. 25,747
Attorney for Applicant(s)

Examiner: Karen Masih

Attorney Docket No.: 79075

Customer No.: 22242

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed February 17, 2005, please amend the above-identified patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begin on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

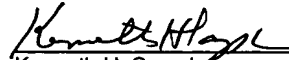
Appln No.: 10/748,885
Filed: December 30, 2003
Applicant(s): Bernard J. Wojciak
Title: SYSTEM AND METHOD FOR
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BARRIER OPERATOR
Art Unit: 2837
Examiner:
Attorney Docket: 79075
Customer No.: 22242

Confirmation No. 8421

CERTIFICATE OF MAILING

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5/13/05
Date


Kenneth H. Samples
Registration No. 25,747
Attorney for Applicant(s)

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment/reply in the above-identified application.

- ☐ An Appendix including amended drawing figures labeled as "Annotated Marked-up Drawings" is enclosed.
- ☐ No additional fee is required.

Fee Calculation For Claims As Amended

	As Amended		Previously Paid For		Present Extra	Rate	Additional Fee
Independent Claims	5	-	5	**=	0	x \$ 200.00 =	\$ 0.00
Total Claims	20	-	20	* =	0	x \$ 50.00 =	\$ 0.00
Fee for Multiply Dependent Claims						\$ 360.00	
** At least 3					Total Additional Fee		\$ 0.00
* At least 20							

- ☐ Applicant(s) assert entitlement to Small Entity Status (37 C.F.R. § 1.27), thus reducing the fee by half to: \$ 0.00

Application No. 10/748,885
Amendment dated May 13, 2005
Reply to Office Action of February 17, 2005

- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1135.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1135. Should no proper payment be enclosed herewith, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1135. A duplicate copy of this sheet is enclosed.

May 13, 2005

Date

Kenneth H. Samples

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Registration No. 25,747

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